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AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/775,697
Filing Date	Feb. 11 / 2004
First Named Inventor	Xiaoda Xiao
Art Unit	2872
Examiner Name	Khatry, Pranav V.
Attorney Docket Number	5572-1002

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☐ Please change the correspondence address for the above-identified application to:

☐ The address associated with  
Customer Number:

OR


<input type="checkbox"/> Firm or Individual Name	Xiaoda (Richard) Xiao		
Address	135 Belchertown Rd.		
City	Amherst	State	MA Zip 01002
Country	U.S.A		
Telephone	413-253-7456	Email	xiaoda3@verizon.net

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	Xiaoda (Richard) Xiao		
Date	Jan. 18, 2006	Telephone	413-253-7456

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.

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